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JAN 11 2005

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: WERNER-JAKOBS, Angelika et al.) Examiner
Application No.: 10/618,580) AMERSON, L. B.
Filing Date: July 15, 2003) Art Unit:
Docket No.: 20228.8) 3764
For: DEVICE FOR CARRYING OUT AN)
ACTIVE MOTION THERAPY)
METHOD AND SHAPED BODY OF)
SUCH A DEVICE)

Amendment

Commissioner for Patents
P.O. Box 1450
Alexandria, Virginia 22313-1450
USA

This communication is in response to the Office Action mailed October 20th, 2004 in the subject patent application. Please amend this application as indicated below.

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Certificate of Transmission

I hereby certify that this correspondence is being facsimile transmitted to the Patent and Trademark Office (Fax No.: 703/872-9306) on January 11, 2005. The communication includes 11 pages.

Signature of Sender:

Paul Vincent

Name of Sender:

PAUL VINCENT

PATENT

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: WERNER-JAKOBS, Angelika et al.) Examiner
U.S. Application No.: 10/618,580) AMERSON, L. B.
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Atty. Docket No.: 20228.8) 3764
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ACTIVE MOTION THERAPY METHOD)
AND SHAPED BODY OF SUCH A)
DEVICE)

TRANSMITTAL LETTER FOR AMENDMENT

Commissioner for Patents
Alexandria, VA 22313-1450
U.S.A.

Transmitted herewith is a response to an Office Action in the above identified application. Please note the following crossed items.

(X) No additional fee is required.

() The fee has been calculated as shown below:

S.N. 10/618,580 filed July 15, 2003
 WERNER-JAKOBS, Angelika et al.

Atty. Docket: 20228.8

CLAIMS AS AMENDED

	Claims Remaining After Amendment		Highest Number Previously Paid For	Present Number Extra	Rate	FEE
Total claims	30	-	31	X	x\$50	0
Independent claims	3	-	3	X	x\$200	0
Multiple dependent claim added					\$360	0
					TOTAL\$	0
() If small entity, then divide total fee by 2					SMALL ENTITY TOTAL \$	0

- () A Petition for Extension of time under 37 CFR 1.136(a).
- () Please charge Deposit Account Number 50-0698 in the amount of \$
for the Extension fee.
- (X) The Commissioner is hereby authorized to charge payment of fees
associated with this communication or credit any overpayment to Deposit
Account Number 50-0698.
- (X) Applicant believes that no extension of term is required. However, this
conditional petition is being made to provide for the possibility that
applicant has inadvertently overlooked the need for a petition and fee
for extension of time.

Respectfully submitted

Paul Vincent

Dr. Paul Vincent
 Reg. No. 37,461

January 11, 2004

Date

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